## COMBINED DECLARATION AND POWER OF ATTORNEY CONTINUED

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

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## DECLARATION AND POWER OF ATTORNEY - USA PATENT APPLICATION (37 CFR 1.63)

As a below named inventor, I hereby declare that:

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My residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

## LOTION FOR THERAPY OF DERMATITIS

	LOTION FOR THERE	APT OF DERMAIIIIS					
the specification of which:							
(a) is attached hereto; or (b) _X_ was described and claimed in PCT International Application No. PCT/JP02/03746 filed on April 15, 2002 and as amended under PCT Article 19 on (if any) and/or under PCT Article 34 on (if any).							
	that I have reviewed an ne claims, as amended by a		tents of the above identified d to above;				
I acknowledge t 37 CFR 1.56;	he duty to disclose informa	ation which is material to	the patentability as defined in				
application(s) for patent, which designated at lea also identified below, by any PCT international applications.	design or inventor's certifist one country other than checking the box, any fore oplication having a filing date.	cate, or 365(a) of any F the United States of A ign application for pate	a-(d) or 365(b) of any foreign PCT international application(s) merica, listed below and have not or inventor's certificate, or of application(s) of which priority is				
PRIOR FOREIGN APPI	<u>LICATION(S):</u>						
COUNTRY (OR INDICATE IF PCT)	APPLICATION NUMBER	DATE OF FILING (MM/DD/YY)	PRIORITY CLAIMED				
PCT	PCT/JP02/03746	2002/4/15	X				
POWER OF ATTORNE  I hereby appoir transact all business in the		s) and/or agent(s) to p Office connected therew	prosecute this application and with:				
Belinda Lee	(Reg. No. 46, 863)						
Charles Liu	(Reg. No. 53, 226)						
SEND CORRESPONDEN	CE TO:	DIRECT TELEPHONE CALLS TO: (Name and telephone number)					
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